

A R E P O R T

A Transformation Process

G E N D E R
T R A I N I N G F O R
T O P - L E V E L
M A N A G E M E N T
O F H I V / A I D S
P R E V E N T I O N




Published by the AIDSCAP Women's Initiative

Project 936-5972.31-4692046

Contract HRN-5972-C-00-4001-00

The AIDS Control and Prevention (AIDSCAP) Project,
implemented by Family Health International,
is funded by the
United States Agency for International Development.

The background of the entire page is a repeating pattern of stylized, white line-art faces on a solid orange background. The faces are of various sizes and orientations, some with prominent eyes and others with more abstract features, creating a dense, textured effect.

Family Health International (FHI) is a nongovernmental organization that works to improve reproductive health around the world, with an emphasis on developing nations. Since 1991, FHI has implemented the AIDS Control and Prevention (AIDSCAP) Project, which is funded by the United States Agency for International Development (USAID). FHI/AIDSCAP has conducted HIV/AIDS prevention programs in 40 countries. The AIDSCAP Women's Initiative was established in 1994 to mainstream gender issues throughout AIDSCAP and raise awareness of the impact of HIV/AIDS on women within the international community.

April 1997

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Policy makers, researchers and implementers increasingly understand the importance of gender as an issue in HIV/AIDS prevention programs. In Africa, for example, although knowledge about modes of HIV transmission is now widespread, traditions still tip the balance of power in sexual practice toward men instead of women. This gender inequality is perhaps the main problem area impeding HIV/AIDS prevention, since it has been demonstrated that when crucial gender differences in sexual relationships are not addressed explicitly, people cannot—or will not—use the knowledge they have acquired or the methods available to protect themselves against transmission of HIV.

Despite wide recognition of this central problem area, most HIV/AIDS prevention programs continue to overlook gender issues. Yet programs that are gender sensitive and attend equally to the needs of both women and men would contribute to sustained change in their sexual behavior. In order for this perception to permeate institutional thinking and actions, gender must become an explicit consideration in the design and implementation of HIV/AIDS prevention programs.

The AIDSCAP Women's Initiative assumes that top-level management is the crucial level at which gender-sensitive HIV/AIDS prevention programs need to be initiated, institutionalized and sustained. Awareness and skills are necessary for program implementers as well, but if they are to integrate gender into their activities on a continual basis, they must have support from top-level management. And while managers may understand the need to recognize gender differences from a social and cultural point of view, they also need to learn the skills that will enable them to incorporate this understanding into their organizations' policies and programs.

The Gender and AIDS Activity described in the companion report and manual, *A Transformation Process: Gender Training for Top-level Management of HIV/AIDS Prevention*, is the AIDSCAP Women's Initiative's response to the training needs of top-level managers faced with using new information about the AIDS epidemic and women. Both the training manual and the report present material developed for the Africa Gender and AIDS Activity, a pilot activity concerned with the development of planning and training methods for top-level management in organizations involved in HIV/AIDS prevention. Evaluation statements completed by participants in the project revealed that it was highly successful and provided a considerable "eye opener" on the purpose and process of gender mainstreaming.

This report will be of particular use and interest to gender trainers in general, and those who target policy makers, planners and implementers concerned with women's issues in national HIV/AIDS prevention programs. The report is expected to be useful to a wide audience of top-level managers in development as well as HIV/AIDS prevention programs.

Dr. E. Maxine Ankrah
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ACKNOWLEDGMENTS

The Gender and AIDS Activity was developed through a collaborative effort of the Family Health International AIDSCAP Women's Initiative (AWI), the AIDSCAP Africa Regional Office, and the U.S. Agency for International Development's (USAID) Regional Economic Development Service Office for Eastern and Southern Africa (REDSO/ESA). The Women's Initiative is grateful to the AIDSCAP regional director for Africa, Godfrey Sikipa, for his support and that of his staff, namely, Janet Hayman, Pamela Onyango, Constant Kabwasa, Rhoda Okungu, Rosemary Njoroge and Keziah Gitahi. Thanks also go to the director of REDSO/ESA, Keith Brown, who provided timely information and assistance to the project. Other REDSO/ESA staff who provided technical assistance in the design of the project were Joan La Rosa, Victoria Wells and Wanjiku Muhato.

The ideas generated by FHI/AIDSCAP and REDSO/ESA for the gender and AIDS activity were realized in consultation with Sara Hlupekile Longwe and Roy Clarke, a wife and husband consulting firm, Longwe Clarke and Associates of Zambia. Documents developed by the consultants for this project include training materials which feature new theoretical frameworks for gender mainstreaming, facilitator and participant guidelines, case material, and simulation exercises. Longwe Clarke and Associates provided the major input of materials contained in the companion document, the training manual.

AIDSCAP's Women's Initiative gratefully recognizes the work of Leah Njambe Wanjama, Africa-based consultant to AWI, and Masheti Masinjila, female and male gender specialists/facilitators, who assisted Longwe Clarke and Associates with training and coordination.

A number of people at AIDSCAP Headquarters played a role in making the Gender and AIDS Activity possible. Thanks go to Tony Schwarzwald, AIDSCAP deputy project director, who continuously encouraged the activity and ensured availability of the necessary resources. Thanks also is due to the skilled and supportive team members of the Women's Initiative, Mary Kay McGeown and Jane Schueller-Rosengren, who assisted with the editing and production of this document.

FHI/AIDSCAP is grateful to USAID for its support of this project through Africa Bureau funds, the active participation of Barbara De Zalduondo, and full support of S. Denise Rouse, Victor Barnes and Jacob Gayle of the Global Bureau, HIV/AIDS Division.

Finally, and of utmost importance, gratitude is expressed to the USAID Mission AIDS specialists, AIDSCAP resident advisors, and high-ranking representatives of both government and nongovernmental organizations who participated in the two workshops of the activity and who, over the period of seven months, shared their knowledge, wisdom, and resources in order to implement country plans for mainstreaming gender into AIDS prevention.

The discussions below summarize the design and activities of the Gender and AIDS Activity. A training manual containing all documents produced by the project is being distributed at the time of this report and is available.



EXECUTIVE SUMMARY

INTRODUCTION

This report marks the close of the **Gender and AIDS Activity**, conducted by Family Health International's AIDS Control and Prevention (AIDSCAP) Project. The incorporation of women's issues and concerns into HIV/AIDS prevention entails addressing gender issues in all project and program areas, irrespective of the sectors or types of AIDS prevention effort, rather than segregating gender issues into separate "women's projects." This is implicitly a transformation process.

The discussion below summarizes the design of the project, examines successes and problems, and suggests directions for follow-up.

PROBLEMS ADDRESSED BY THE PROJECT

Throughout the world, progress in slowing the HIV/AIDS epidemic is threatened by a lack of awareness of and attention to gender issues in AIDS prevention. The traditional prevention strategies, messages and methods have limited grounding in the realities of human sexuality and sexual decision making, offering inadequate protection for many women. Despite a high level of knowledge of modes of infection and methods of prevention, social and cultural constraints often frustrate the ability of both men and women to make decisions and use available methods of preventing HIV transmission.

In spite of recognizing this central problem area, most national AIDS prevention and control programs continue to be "gender neutral"—ignoring gender power inequalities within sexual relationships. Programs tend to overlook gender issues altogether or insufficiently identify these as mere facets of the problems requiring attention. In this situation, program goals and objectives commonly fail to reflect a gender dimension, and this omission, in turn, thwarts successful AIDS prevention and control.

THE GENDER AND AIDS ACTIVITY

Support for AIDS policies and programs that are "gender sensitive"—that is, that recognize the perceptions and interests arising from women's different social position and gender roles—requires commitment and involvement from policy makers, the highest level of political and economic leadership. However, it is those who influence policy, who plan and monitor programs, and who implement or

provide resources for implementation who ultimately shape the orientation of programs and determine the extent to which gender concerns are incorporated into them. Little attention has been given to equipping this category of professionals with the knowledge and methods required to mainstream gender into AIDS prevention efforts. Thus, they are the "top-level" management targeted by the AIDSCAP gender training.

To address this need, AIDSCAP's Women's Initiative and Africa Regional Office collaborated with REDSO/ESA to launch a series of activities referred to as the Gender and AIDS Activity. With discussions started in January 1995, this initiative was concerned with providing support to the process of gender mainstreaming in AIDS prevention through projects in five countries of East and Southern Africa: Ethiopia, Kenya, South Africa, Tanzania and Zimbabwe.

The Gender and AIDS Activity aimed to equip top-level managers with the skills needed to incorporate gender into programs through training and sensitization. The project focused on developing methods and skills that would enable persons in high-level positions, both governmental and nongovernmental, to revise or design policies and programs from a gender perspective. The assumption was that the develop-



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ment of training methods and intervention models was an urgent need if gender considerations were to become cross-cutting issues in all policy and programs, particularly in HIV/AIDS prevention.

GOAL AND PURPOSE

The project goal was to enable policy makers and planners to guide and design policies and programs that explicitly recognize and address gender issues. The project's primary purpose was then to provide participants with tools to incorporate gender issues into AIDS prevention activities. To realize this goal and purpose, the Gender and AIDS Activity was implemented in three phases, each with a defined set of objectives:

PHASE ONE: GENDER AND AIDS WORKSHOP

A five-day Gender and AIDS Workshop was held October 16-20, 1995, to provide training in gender analysis¹ and mainstreaming, and in developing an action plan for the gender orientation of an AIDS prevention project. Activities during this phase were to:

- identify appropriate workshop participants from East and Southern African countries, currently involved in the development and implementation of AIDS prevention programs, in a position to make decisions, and interested in training to improve gender mainstreaming;
- design appropriate workshop training materials;
- hold a five-day training Gender and AIDS Workshop, to culminate in action plans for addressing gender issues in AIDS programs;
- evaluate training progress in terms of target group outputs and assessments.

PHASE TWO: ACTION PLAN IMPLEMENTATION

As a follow-up to the workshop, participants implemented their action plans for mainstreaming gender concerns into local projects. The five action plans were efforts to:

- empower adolescent girls in Zimbabwe by providing adequate and correct information and equipping them with interpersonal skills essential to HIV/AIDS and STD prevention;
- provide female commercial sex workers in South Africa with legal advocacy skills, referrals to legal aid services and human rights training;
- incorporate gender into the existing workplace HIV/AIDS prevention project in Kenya;

¹ Gender analysis means a close examination of a problem or situation in order to identify the gender issues and the obstacles to progress in addressing these in all aspects of the program—in project objectives, in the choice of intervention strategy and in the methods of program implementation.

- build the capacity of nongovernmental organizations (NGOs) in the Iringa NGO cluster in Tanzania to address gender issues;
- incorporate gender into the HIV/AIDS prevention and family planning programs targeting male and female adolescents in Ethiopia.

Action plan implementation in the five participating countries was originally intended to take place between November 1995 and May 1996, but countries initiated, implemented and completed their projects at different times. The primary activity of the AIDSCAP Women's Initiative and consultants during this phase was to monitor progress at the country level.

PHASE THREE: EVALUATION WORKSHOP

Participants reconvened at a three-day Evaluation Workshop held May 12-15, 1996, to: report on their action plan implementation experience; identify evaluation questions, processes and indicators; and consider the implications for improved gender mainstreaming in national AIDS programs. Activities for this phase were to:

- conduct a three-day Evaluation Workshop to reconsider implementation strategies seven months after the first workshop;
- revise intervention methods and training materials in light of evaluation findings;
- produce a project report and training module for addressing gender issues in AIDS prevention programs.

THE TARGET GROUPS

In identifying participants for the Gender and AIDS Workshop, AIDSCAP with REDSO/ESA targeted top-level management who influence or make policies, and direct program planning and implementation. Changing attitudes and skills at that level, they reasoned, could potentially influence gender-sensitive policy and program development more decisively than if training were targeted solely at implementers. It also was assumed that training to improve understanding and skills in gender and AIDS for performing their roles was of higher priority than a focus on the participants' personal attitudes, behaviors, and cultural perspectives.

Selection of participants was based on the extent to which their decision making could affect national program design, program implementation, and advocacy/networking.

Selection of participants was based on the extent to which their decision making could affect national program design, program implementation, and advocacy/networking. Each of the five countries was represented by officials comprised of a mix of HIV/AIDS technical specialists in USAID Missions, AIDSCAP resident advisors, and representatives from government and nongovernmental organizations. Among the participants were the deputy manager of a National AIDS/STD Control Programme, the coordinator of an AIDS NGO Consortium, the Provincial AIDS coordinator, and the senior expert in women's affairs in the Office of the President. Each country's team had representatives from the different categories who were concerned with the planning and implementation of one particular country project, which would become the focus of an action plan for incorporation of gender issues. Kenya, Tanzania, South Africa, Zimbabwe and Ethiopia sent teams of officials to the workshop.

ASSESSMENT AND OUTCOMES

The country teams participated in all three phases of the activity, as workshop participants in phases one and three, and as program implementers in phase two. Participants gave the overall activity high ratings, and appreciated the extent to which the training had "opened their eyes" as to how to recognize and deal with gender issues in AIDS programs.

The implementation of action plans was limited by several factors: slow progress made in change of attitudes by other top-level policy makers and managers with respect to gender issues; rigid bureaucratic structures; and shortage of time and other resources.

These problems and obstacles, however, proved instructive. The Evaluation Workshop (phase three) ended on an optimistic note, by identifying how to:

- improve the management of the action plan implementation process so that such activity might be replicated in another region or by other organizations;
- use the action plan approach as the beginning, or nucleus, of the development of the process of gender mainstreaming within each country's wider national AIDS program;
- deal with obstacles by developing alternative intervention strategies, such as advocacy and networking, to promote the transformation process by expanding the gender orientation of national AIDS programs.

As this was a pilot activity in an area that had been largely neglected previously as an integral component of AIDS prevention, the project designers were concerned with defining steps for follow-up. Four steps were identified: a) revision and dissemination of the Gender and AIDS Workshop training module for use with other top-level policy makers and program managers, at both regional and national levels; b) development of a "handbook" for incorporating gender that could be used by organizations as an in-house guide; c) development of a shorter training program that would accommodate the busy schedules of top-level management of AIDS prevention and development programs; and d) replication of the model for application of mainstreaming strategies from individual projects to national programs.

This report examines each of the three project phases in terms of its original intent and actual implementation. The final section identifies the main recommendations for project follow-up.



THE STRATEGY

The first phase of the project was a five-day training session, which took place October 16-20, 1995, in Mombasa, Kenya. This workshop provided the 41 participants with the essential training that would prepare them for formulating and implementing action plans in their countries.

The training strategy followed a process of moving the analysis of AIDS-relevant gender issues from the personal to the social level, and from the social to the institutional level. At that level, the analysis focused on concerns of AIDS programs, their evaluation, and possible revision. As the interpretation of gender issues became more complex, the participants were introduced to additional conceptual frameworks to assist in the process of “unpacking,” or separating the different gender issues, and explaining their relevance to an AIDS program.

The workshop first aimed to develop the participants’ ability to recognize and analyze aspects of gender issues which are often hidden or embedded within patriarchal culture. This led to an analysis of the process of social change and actions through which gender issues can be

addressed. As the final and most important stage of the workshop, this analytical ability was applied to the project plans brought by each country team. These preliminary drafts were then revised by each team to become workable action plans for improved gender orientation of the specific country project.

MONITORING AND EVALUATION OF THE GENDER AND AIDS WORKSHOP

The highly participatory workshop design called for an elaborate system of daily monitoring and evaluation, as well as an end-of-workshop assessment of the level of success. (For a summary of the main end-of-workshop findings, see Appendix I.)

At the end of each workshop day, the trainers met with the workshop director from the Women’s Initiative to go over responses from the end-of-day evaluation forms, and to discuss their impressions of the day’s events. These sessions were used to identify and address the special problems the participants experienced in understanding and applying the

A three-step strategy helped workshop participants to conceptualize the progression in problem analysis from the personal to the institutional level, and from more simple to more complex issues.

STEP ONE: The trainers presented analytical frameworks to highlight the gender issues and related problems.

STEP TWO: Participants worked in small groups to identify AIDS-relevant gender issues, and suggest interventions and the sequence of actions for dealing with such issues.

STEP THREE: Small groups reported back to share their findings with the larger group. The larger group assessed each small group’s identification and analysis of gender issues, as well as the feasibility of suggested actions.

The workshop also included role-playing exercises to prepare country teams to counter possible bureaucratic resistance to gender approaches to HIV/AIDS prevention.

ideas introduced during the past sessions. In addition to daily monitoring, the workshop director and trainers met on the day after the workshop ended to review the five-day event and plan for the implementation phase.

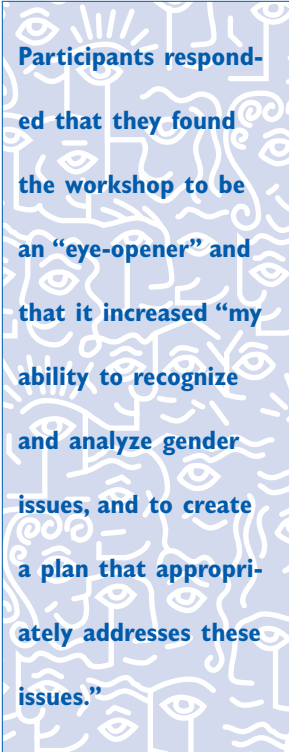
FINDINGS FROM MONITORING AND EVALUATION

Because the workshop and its training module were experimental, the main emphasis of the end-of-workshop evaluation meeting was on formative evaluation to identify ways in which the design could be improved.

The workshop steering committee, consisting of representatives from AWI, the AIDSCAP Africa Regional Office, REDSO/ESA, USAID, and the participating countries, proposed shortening and simplifying the tasks of each country team so that these could be completed by the end of the

workshop. Despite this effort, country teams had developed rather incomplete action plans by day five. For this reason, in the final plenary discussions the group decided to allow an additional three weeks after the workshop for teams to finalize their action plans. These were developed into a country proposal and submitted to AIDSCAP for funding to support implementation.

The findings from the end-of-workshop evaluation showed that the workshop had succeeded in achieving its objectives: Participants responded that they found the workshop to be an “eye-opener” and that it increased “my ability to recognize and analyze gender issues, and to create a plan that appropriately addresses these issues.”



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FROM ANALYSIS TO ACTION

Phase two of the activity, the implementation phase, was launched in the five participating countries, with a variety of experiences and outcomes. This phase was included to ensure that participants had the opportunity to apply their newly learned skills to practical country situations. Each country team was allocated US\$10,000 for these projects, some of which were free-standing and others which were amendments to existing AIDSCAP subprojects.

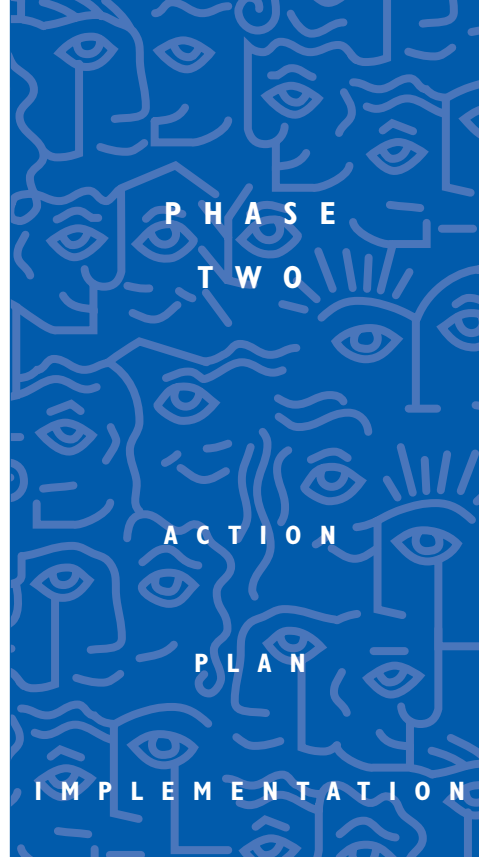
The original proposal for technical assistance to the Gender and AIDS Activity allowed for some limited support from consultants during the implementation period. This support was intended to take the form of monitoring progress, including short visits to project sites. It had also been recommended at the conclusion of the Gender and AIDS Workshop that the consultants advise the teams, when needed, during implementation of their projects. As funding became available later in the implementation period, the consultants were able to visit two countries, Zimbabwe and South Africa, in order to identify typical situations and problems to be explored at the upcoming Evaluation Workshop, or phase three.

MAINSTREAMING GENDER AT THE PROJECT LEVEL

Each of the five countries attempted to operationalize action plans, based upon the workshop experience, with varying degrees of success.

SOUTH AFRICA

For its workshop focus the South Africa country team selected an existing project in KwaZulu-Natal Midlands, the province with the highest HIV prevalence in South Africa. The goal of that larger ongoing activity was to promote safer sexual practices and provide increased access to condoms and other barrier methods for commercial sex workers, their



truck driver clients, and their regular partners in an effort to reduce the incidence of HIV infection.

The team determined that the existing project did not adequately address the harassment, entrapment, and violence to which female commercial sex workers (CSWs) are routinely subjected by their clients and the authorities, and which

impede AIDS prevention efforts. The criminalization of prostitution in South African law for example, results in many human rights violations against sex workers by the authorities: Occurrences of rape, assault, robbery, unlawful arrest and detention by police are common. The team's action plan was designed to address these abuses by focusing on training, specifically for the CSWs and law enforcement officials. The project also sought to improve access by CSWs to legal aid. It called for the promotion of changes in the legal and human rights status of this group of women as a key component of AIDS prevention. The Lawyers for Human Rights, a non-profit, rights-oriented organization, was selected as the implementing agency for the South Africa project.

The intervention proposed in the action plan was aimed at developing a climate within which: sex workers would be empowered by knowledge of their rights; the people with whom they come into contact would be confronted with regard to their attitudes; and the criminal nature of the profession would be challenged. Activities outlined in the action plan included:

- offering HIV/AIDS and STD training to law enforcement officers in order to raise awareness and understanding of the implications of working against safer sex campaigns, as is the practice of arresting female CSWs for the possession of condoms;
- providing training for CSWs on their legal and human rights;
- convening a national consultative meeting for key participants from the legal field to coordinate efforts to decriminalize sex work;

- establishing a referral system so that female CSWs with legal grievances gain access to legal aid services;
- coordinating project activities with the existing campaign to decriminalize commercial sex work.

Implementation of the plan in South Africa began in January 1996. By the time the Evaluation Workshop was held in May, the South Africa team had some positive results to report. At the beginning of the year, a National Consultative Conference was called by the Lawyers for Human Rights, and a National Network towards the Decriminalization of Prostitution (DECPRO) was formed. The aim of DECPRO is two-fold: The first objective is to attain the decriminalization of prostitution; the second is to educate and empower sex workers as to their rights and alert them to available means of protecting these rights. DECPRO also seeks to sensitize agencies with which sex workers come in contact. Many of the legal practitioners who attended the National Consultative Conference, however, were reluctant to join a campaign to decriminalize commercial sex work, fearing repercussions by the law enforcement system.

During the implementation period, a group of 24 sex workers received rights training with respect to arrest, bail, rape, assault and bribery. With raised awareness, they are better equipped to inform others of their legal rights, challenge injustices, and protect themselves from HIV infection. The team also reported that sex workers were translating their new legal knowledge into action by coming forward more often with cases and problems.

TANZANIA

The country team for Tanzania developed an action plan for building the capacity of collaborating NGOs in the Iringa Region of the country to address gender issues in AIDS prevention projects. This was part of a broader AIDSCAP project, using an “NGO cluster” strategy in which geographically-concentrated NGOs develop and coordinate an action program managed by an identified lead NGO. During discussions at the workshop, the Tanzania team realized that more women than men were involved in HIV/AIDS control efforts in their country. The current program was not gender-focused, and NGOs lacked the capacity to apply gender skills in HIV/AIDS control and prevention.

Specifically, the action plan aimed to train two participants—one male and one female—from each of the 18 NGOs in leadership skills for gender-focused interventions. By the time of the Evaluation Workshop, Tanzania had succeeded in introducing and completing most of the activities outlined in its action plan. Thirty-six participants from the Iringa NGO cluster had received training in leadership skills for identifying gender issues and modifying interventions. A training manual was being drafted to further enhance the skills of the targeted NGOs.

Heartened by its success in the Iringa region, the Tanzania team decided to replicate this effort in the entire National AIDS Program, using the existing NGO cluster structure. In August 1996 (three months after the Evaluation Workshop) the Tanzania team organized a training-of-trainers gender workshop for participants from nine regions. Each NGO cluster was asked to send four highly motivated representatives to the five-day training who would—once trained—spearhead gender training in their clusters. At the training each of these cluster teams designed a gender training program to be implemented over a period of six months, after which they would reconvene to share progress and experiences of gender mainstreaming in their clusters.

ZIMBABWE

Statistics in Zimbabwe indicate higher rates of infection among girls ages 15-25 than among boys. Studies of adolescent sexual behavior also show high rates of sexual activity, with most adolescent girls engaging in sex with older men. The Zimbabwe country team determined the importance of working with young girls, recognizing that the gender power dynamics that exist between young girls and boys within society make it harder for them to assert themselves within relationships.

The team developed an action plan to empower adolescent girls to protect themselves against HIV/AIDS by providing them with appropriate information about reproductive health, STDs and HIV/AIDS, and equipping them with interpersonal skills essential to HIV/AIDS and STD prevention. The Women and AIDS Support Network (WASN), the implementing agency for the Zimbabwe action plan, was already working with school girls in a pilot youth project at a secondary school in Gokwe District. Using this pilot project as a blueprint, WASN conducted a needs assessment in six other schools, nationwide, to assess the extent to which adolescent girls, ages 13 to 19 years, are aware of the factors contributing to their vulnerability. According to the plan, the findings would then be used to develop appropriate workshops for the girls on topics such as assertiveness, the woman’s body, sexual health, communication skills and HIV/STDs.

Although all six of the schools volunteered to participate, in one of the schools, the Zimbabwe team faced fierce resistance from teachers who felt that the message for girls was simply that they should “say no to sex.” The teachers were unwilling to discuss responsible sex or sexual negotiation within sexual relationships, as they preferred not to acknowledge the existence of such relationships. The team also encountered a lack of support from the National AIDS Control Programme whose attitudes on girls’ empowerment seemed to reflect those held by the teachers. To mitigate this opposition, the action plan was revised to increase networking and advocacy efforts, through which the team hoped to create wider support for the action plan and forge workable linkages with organizations having similar objectives and goals in working with youth.

KENYA

The Kenya country team developed a plan of action to mainstream gender into the existing HIV/AIDS prevention worksite projects in Nairobi implemented by Family Planning Private Sector (FPPS). The team agreed on the need to modify existing peer education, management orientation and condom distribution activities to take into account gender disparities. In the area of peer education, a company would be identified as the site for setting up a model, gender-sensitive peer education program. Gender issues were to be included in curriculum topic guides for peer educators, including topics such as condom negotiation skills, sexual harassment, and sexual and social norms that hinder AIDS prevention. The plan also aimed to ensure that condoms be available in the workplace equally to men and women, and that management commit to the participation of women in all program components, both as trainers and as trainees.

While implementation was delayed due to difficulties in getting the identified workshop to accept the project, and identifying interested implementing agencies, the Kenya team hired a consultant to guide the program and established an advisory committee to facilitate continued input into the gender mainstreaming process. Previously, the consultant had participated as an observer in management orientation and peer education workshops organized by FPPS in a number of worksites.

Through collaboration with FPPS, the Kenya team had made significant progress by the time of the Evaluation Workshop in May. Support had been gained from FPPS, and 12 program officers had been gender sensitized for work among their peers.

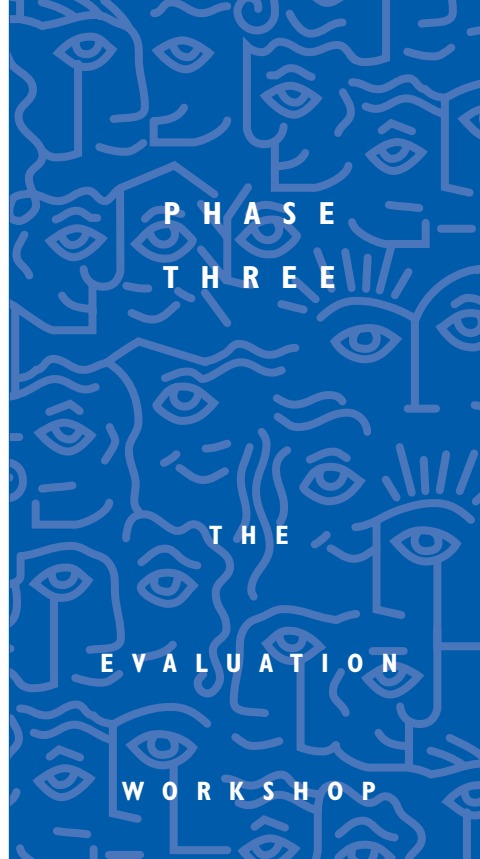
ETHIOPIA

The Ethiopia country team developed an action plan to incorporate gender into the HIV/AIDS prevention and family planning programs of Marie Stopes International-Ethiopia (MSIE) which targeted male and female adolescents. The plan aimed to enable out-of-school youths to develop safer sex negotiation skills to protect them from contracting HIV/AIDS and other STDs, and to establish a forum for adolescents to discuss their equal responsibility for fighting HIV/AIDS and STDs. The plan was also designed to strengthen the existing STD referral system for male and female adolescents, in collaboration with the health centers, and to promote their increased use of family planning services.

The team planned to create “youth centers” where young people could spend time and obtain information on HIV/AIDS. As the target group includes many unemployed adolescents, the youth centers would be venues for conducting income-generating activities, such as selling tea, coffee and snacks, and for indoor games. In addition, community leaders would be sensitized to gender-related problems that affect AIDS prevention efforts among the young and be made aware of their responsibility as adults for addressing the epidemic among adolescents.

Ethiopia’s team was unable to initiate its action plan during the scheduled implementation period, due to temporary disruption of activity in the Ethiopia AIDSCAP country program. By May however the situation had changed, and the Ethiopia team participated in the three-day final Evaluation Workshop where they revised their earlier proposal and developed the action plan described above. Implementation took place from August 1996 until January 1997.

Despite its late start, the team made rapid progress. What was initially an effort confined to two districts of Addis Ababa is now being integrated throughout MSIE’s programs nationally. The STD/AIDS team at the Ministry of Health plans to conduct a workshop to address gender and AIDS issues. Topics such as how to make family life education for young people a gender-sensitive topic, and how to incorporate gender and AIDS into health workers’ training curricula are to be discussed during the workshop, scheduled for early 1997.



EVALUATION

Defining measures of success at the outset, monitoring progress, and evaluating impact are critical to ensuring that AIDS prevention efforts are using resources effectively and achieving results. AIDS programs have traditionally relied on the “number of condoms sold” or the “number of people reached” through the intervention as indicators of success. But how does one evaluate gender-oriented objectives and activities? And how does one evaluate the process of gender mainstreaming within programs? The second workshop of the Gender and AIDS Activity assumed that traditional evaluation methods and indicators do not focus adequately on gender issues. In designing the Gender and AIDS Activity, evaluation was viewed as an integral part of the package needed to equip top-level managers with a gender perspective for their AIDS prevention programs.

The Evaluation Workshop, held May 12-16, 1996, in Mombasa, Kenya, thus represented the culmination of over six months of commitment to the Gender and AIDS Activity. It was an opportunity for the participants to review the successes and failures of the period of action plan implementation, and to assess the effectiveness of the first Gender and AIDS Workshop. More importantly, it was an opportunity to see the road ahead—how this experience could form the basis of and establish the strategies for gender mainstreaming within national AIDS programs.

DESIGNING THE EVALUATION WORKSHOP

Contrary to the approach in phase one, the content and shape of the phase three Evaluation Workshop was not fully determined in 1995 at the planning stage of the activity. The design relied heavily on the emergence of important issues during the first two phases. The evaluation workshop plan sought a design that would be structured

sufficiently to enable useful workshop outcomes, but also “loose” enough for adaptation. In this way, participants would have the opportunity to adjust the content and sequence of the workshop to respond to the topics derived from consideration of the teams’ action plan reports.

The workshop design thus evolved from pre-workshop discussions between the consultant/trainers and the Women’s Initiative, with the latter providing the suggestions that helped shape the final plan in the weeks before the Evaluation Workshop. The process continued throughout, with critical commentary from the steering committee incorporated by the consultant/trainers over the three days of the workshop. (This process is discussed in more detail below.) In addition, the workshop design reflected the information and insights gained through the consultants’ technical assistance visits to South Africa and Zimbabwe.

Re-orientation of training occurred therefore in the course of the Evaluation Workshop. An important outcome of this adaptation was that participants were able to shift emphasis from the single projects to consideration of the wider programmatic implications of developing strategies for gender mainstreaming within a national AIDS program. This also provided participants with an opportunity to use their experience and skills at the project level and link them to more comprehensive activities in gender mainstreaming, including evaluation of the process.

In a pre-workshop meeting the trainers and planners agreed that

In designing the Gender and AIDS Activity, evaluation was viewed as an integral part of the package needed to equip top-level managers with a gender perspective for their AIDS prevention programs.

An important outcome of this adaptation was that participants were able to shift emphasis from the single projects to consideration of the wider programmatic implications of developing strategies for gender mainstreaming within a national AIDS program.

the daily activities would not go far enough to inspire new directions for action plans. Rather, the activities would result only in internal improvement of existing action plans. This meant that some additional revisions were needed. On the first day of the workshop, during the introduction to the workshop plan, the consultant/trainers explained this larger programmatic interest. In addition, the country team activity planned for the third day was revised to focus the country teams on this larger purpose.

New evaluation frameworks were introduced and participants were led to rework the evaluation criteria in an explicit way. They had previously been implicit, and, therefore difficult to use in showing progress. The final reorientation occurred on the third day as participants were helped to identify and interpret cross-

cutting patterns, and to refocus and realign projects as national programs.

GOAL OF THE FINAL PHASE OF ACTIVITY

This final phase of activity was intended to use the teams' action plan reports as the basis for a workshop centered on evaluation. Three related topics were developed through the workshop. These were:

FORMATIVE EVALUATION—to examine action plan progress so far, discover the problems faced and lessons learned, and determine how project design and implementation could be improved;

IMPROVED PROJECT EVALUATION—to consider alternative method and indicators for evaluating gender-oriented objectives and activities as a basis for improved monitoring of projects;

IMPROVED PROGRAM EVALUATION—to assess the role of action plans in promoting the wider process of gender incorporation in national programs, and to identify methods for monitoring and evaluating the process of gender mainstreaming at that level.

EVALUATION WORKSHOP STRATEGY

Each country team came to the Evaluation Workshop with a six-page Action Plan Report, prepared according to a Guideline for an Action Plan Report, which they received before the workshop took place. The workshop was organized in the three-step sequence outlined below:

STEP ONE: The Evaluation Workshop began with individual country reports focused on the successes and constraints of implementing action plans. The teams then moved toward identifying the general patterns and common themes seen across all of the action plans. New analytical frameworks were introduced at this stage to illuminate the process and methods of project evaluation.

STEP TWO: Inter-country discussion groups were formed to identify the main issues that appeared to cut across several action plan reports. This discussion led to suggestions of ways to promote the integration of gender into national programs. Participants also identified types of evaluation questions arising in monitoring the process of reorienting programs.

STEP THREE: Having gained insight from an inter-country perspective, each country team was then asked to apply the broadened outlook while reconsidering their own country plans. The workshop, in effect, moved from the use of particular projects to gain insights and ideas on *general issues*, to the application of these general issues to *particular* country situations. Depending upon the problems and potential of the action plan, the country group was asked to suggest improvements in design and evaluation methods.

The teams were also asked to consider how the action plans could provide a basis for improved gender mainstreaming in their national programs. Through this strategy, each country team revisited their reports and concluded the workshop with guidelines for expansion of action to the national level. The transformation process had taken place and was made explicit not only in terms of understanding gender issues, but also in the action plans that set new directions for AIDS prevention efforts in their respective countries.

The workshop, in effect, moved from the use of particular projects to gain insights and ideas on general issues, to the application of these general issues to particular country situations.

ASSESSMENT OF THE EVALUATION WORKSHOP

The system for monitoring and evaluating the Evaluation Workshop followed the same pattern as that described above for the earlier Gender and AIDS Workshop: a daily evaluation, with findings considered at an end-of-day meeting of the steering committee; a fairly extensive end-of-workshop questionnaire for participants, followed by a plenary evaluation discussion on the third day; and a post-workshop evaluation meeting.

Women's empowerment is central to the process of addressing gender issues. As part of an empowerment approach, participatory evaluation is essential to the planning and management of a project.

The plenary evaluation meeting had two purposes: first, to examine the success of the final phase of the Gender and AIDS Activity, the Evaluation Workshop; and second, to look back at the whole activity since its inception more than a year earlier, and to determine the lessons learned and possibilities for follow-up. The second purpose is considered in detail in the final section of this report.

The findings from the End-of-Evaluation Workshop Questionnaire, noted in Appendix II, show a fairly high level of satisfaction with the appropriateness of workshop activities and materials. However, the ratings were markedly lower in the area of "presentation on evaluation methods" and "evaluation frameworks"

than had been the case for country group work and cross-cutting topic patterns. This was a disappointing finding for a workshop that was primarily concerned with improving evaluation methods.

There were some difficulties in the two workshops. A major reason for these appears to be the relationship among project planning, project evaluation, and the process of incorporating gender into program activity. This inter-relationship took the following forms:

- i) Given that only high-level policy makers were recruited for the workshops, the first meeting assumed some knowledge of project planning, and focused on gender mainstreaming within the planning process. Similarly, the second workshop assumed some knowledge of evaluation methods, and emphasized the special aspects of evaluating progress made toward gender-oriented objectives. In each case, it seems that these assumptions were too optimistic; this suggests the need for a stonger

emphasis on evaluation in the future training of project planning staff including training for gender mainstreaming. It might have been useful to administer prior to the workshop a survey of participants in order to gauge their experience in the areas of planning and evaluation.

- ii) The issue of empowerment arises in both the areas of integrating gender and project evaluation. Women's empowerment is central to the process of addressing gender issues. As part of an empowerment approach, participatory evaluation is essential to the planning and management of a project. Both women's empowerment and participatory evaluation are part of a "bottom up" approach to development. There is a need for social theory with the potential to reveal and analyze the conflicts of interest likely to arise in enabling the process of women's empowerment, and in introducing participatory evaluation.
- iii) Internal participatory process evaluation is an essential element for a project concerned with women's empowerment. This is because women's empowerment is not essentially about generating outputs, outcomes or social impact—even though these may be important. Women's empowerment is essentially about the process by which these benefits are achieved. Therefore, methods for internal participatory monitoring and evaluation of the development process are essential in projects addressing gender issues. By contrast, input-output methods of evaluation are not particularly relevant or useful in evaluating the process of women's empowerment. Moreover, implementation in the areas of participatory evaluation and gender mainstreaming both necessitate general involvement rather than compartmentalization. Separate departments, such as those for women, should not compartmentalize program and policy areas, but rather should provide the lead in the mainstreaming process.

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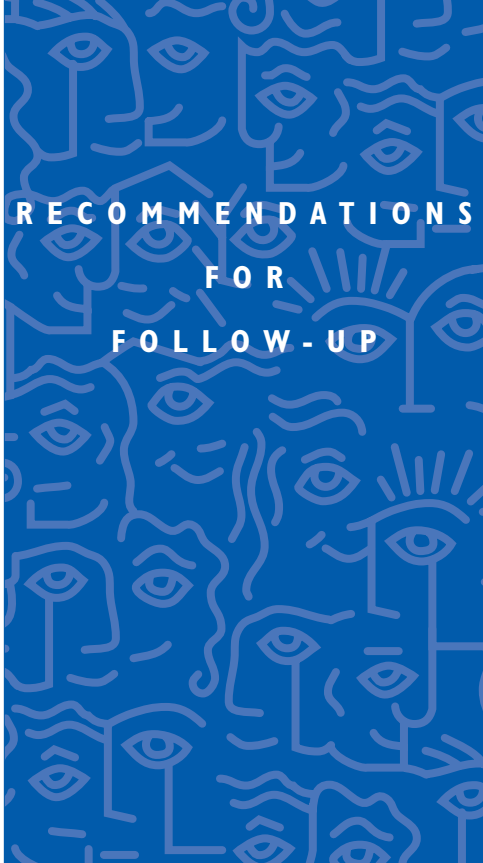
The list above reveals a considerable dilemma in the area of gender mainstreaming and project evaluation. To some extent policies related to women's participation and empowerment are likely to challenge the existing strategy of an AIDS prevention program. If gender integration conflicts with the organizational beliefs and system, then this severely limits the extent to which separate "retreat" workshops for selected personnel can change the implicit goals and purposes that guide staff activities. Given the considerations

just outlined, the AIDSCAP Gender and AIDS Activity model should be viewed as one option to ensure that all of the various units concerned with AIDS programs adopt policies and practices concerned with gender integration.

The end-of-workshop plenary evaluation discussion also put the Evaluation Workshop in the larger context of the three-phased activity. The majority of participants agreed that the basic design and activities of the Evaluation Workshop were appropriate in themselves, and that any problems in making the most of the Workshop were due largely to difficulties encountered during the period of action plan implementation. This became the central topic of the final plenary discussion. In their earlier response to the Evaluation Questionnaire, participants rated the timeliness of AIDSCAP support for action plan implementation lower than the other stages of the Gender and AIDS Activity. Participants were able, nevertheless, to overcome earlier frustrations and move ahead to develop some interesting ideas for national programs, to be explored upon return to their respective countries.

The final plenary discussion at the Evaluation Workshop also revealed that participants felt that the Evaluation Workshop had succeeded because the overall design of the Gender and AIDS Activity was basically sound. Participants said they believed that each phase of the Activity had played a role in serving this larger design.

The group concluded that the activity was worthy of replication, both at national and regional levels. The final reflections were therefore positive and focused on suggestions for improvement next time. These are incorporated in the recommendations that follow.



RECOMMENDATIONS FOR FOLLOW-UP

The recommendations below were developed from plenary discussions as well as post-evaluation meetings. Therefore, they do not represent a “consensus” arrived at during any single meeting. Since the aim is to show, basically, how to improve rather than redesign the Gender and AIDS Activity model adopted by AIDSCAP and REDSO/ESA, it is not necessary to reach consensus on every recommendation listed below.

GENDER MAINSTREAMING IN NATIONAL PROGRAMS

The Gender and AIDS Activity was originally envisioned to focus on integrating gender within a single AIDS prevention project. The implementation experience however revealed that it would be more advantageous to use the project as a starting point and means to influence a gender orientation in larger national programs. The Gender and AIDS Activity then will be most successful in achieving this outcome if it:

- chooses an action plan within a project that has the potential to affect many other projects within the national program;
- chooses a project and country team that can form a nucleus for gender mainstreaming within the national program;
- forms alliances with other organizations involved in AIDS projects;
- forms alliances with other organizations involved in the advancement of women;
- links the project with other national-level programs for gender advocacy and training.

PREPARATION AND SELECTION OF PARTICIPANTS FOR THE GENDER AND AIDS WORKSHOP

Other sections of this report have discussed the selection of participants and indicated the need for better pre-workshop preparation in

the area of writing summaries of project outlines to be examined during training.

It is also recommended that:

- In addition to the existing selection criteria, top-level management participants should be included on the basis of their active and continuing involvement in the project that is to be the subject of the action plan for gender orientation.
- Guidelines for writing the summaries and action plans should be sent out at least six weeks before the workshop begins.
- Trainers designing the workshop should receive copies of the plan summaries or outlines not less than two weeks before the beginning of the first training workshop.

DESIGN OF THE PHASE ONE GENDER AND AIDS WORKSHOP

The main design problem of the Gender and AIDS Workshop was the need for better integration of the pedagogic objectives of introducing knowledge and skills in gender mainstreaming with the more pragmatic objectives of producing workable action plans. Also, workshop planners underestimated the time it would take to modify project plans for gender orientation. Overall, the findings from the Gender and AIDS Workshop suggest that future workshops should include sessions, to the extent possible, that provide skills in integrating gender into policy analysis, evaluation and project planning.

It might be necessary to extend the workshop by several days for these additional sessions. This could be done by having participants (e.g., within the same organization) meet for the required number of days, but not within a single block of time.

ORGANIZATION OF ACTION PLAN IMPLEMENTATION

The assessment above indicates that the action plan implementation process was less than satisfactory. Some problems were due to the timing of funding projects; other problems were due to opposition from bureaucratic structures and resistance to change within programs. The following are recommendations for improving the implementation process:

- allow a limited post-workshop period for improving and finalizing the action plans resulting from the Gender and AIDS Workshop;
- provide technical assistance where needed in finalizing action plans, making gender explicit;
- provide some technical assistance in overcoming problems and in monitoring methods during the implementation period.

In addition, the action plan implementation period should include the following new organizational elements:

- appointment of a Project Manager, based within the region, to oversee the process of project monitoring and evaluation, and to provide any necessary support during implementation;
- establishment of a system of regular reporting to the Project Manager, in order to monitor progress on action plan implementation.

Establishing a regional project management system may not require much additional funding, insofar as this would be organized within the agency sponsoring the Gender and AIDS Activity. Extra funds may be needed to cover travel expenses for visiting the participating countries.

Funds for such regional management might be a more appropriate implementation expense than provision of country-level funds (or seed money) for action plan implementation. If an action plan is part of a larger ongoing program, very little funding should be necessary for the additional effort of gender mainstreaming.

THE DESIGN OF THE EVALUATION WORKSHOP

Problems during the Evaluation Workshop were largely related to those experienced during the implementation period. Some suggestions included:

- Action plan reports should be submitted not less than two weeks before the Evaluation Workshop. These reports, together with the results from regular monitoring during the implementation period, would provide the planners and trainers with better information on which to base the Evaluation Workshop design.
- As stated earlier, evaluation methods should be included as a topic in the initial Gender and AIDS Workshop and as a stronger and more explicit element during the implementation period.

Incorporating evaluation into these earlier stages of the project would provide a stronger basis for the final Evaluation Workshop. Findings from explicit and systematic evaluation methods would be the starting point for a meaningful discussion of obstacles and successes in the implementation process.

FUTURE DEVELOPMENTS AND OPPORTUNITIES

The Evaluation Workshop's discussion of strategies to incorporate gender indicate other possible ways to promote the gender approach in national AIDS prevention programs. These are:

- publication of a handbook which would be based on the revised training module, to be used by top-level management in-house. It would be designed to stand on its own, rather than be used in a workshop situation;
- development of an in-house training package on gender integration in policy and planning, designed for short "gender orientation experiences" for top-level management in various AIDS and development agencies.



NEW DIRECTIONS: MAINSTREAMING GENDER INTO NATIONAL PROGRAMS

CONCLUDING REMARKS

While the Gender and AIDS Activity has officially ended, country-specific activities related to gender are intensifying and moving in new directions. In Tanzania, for example, what began as an effort to build the capacity of NGOs to address gender issues in one region is now being replicated in all nine regions where the country's National AIDS Program is working. Although the Zimbabwe team initially focused on six schools in its action plan to empower adolescent girls to protect themselves against HIV/AIDS, the impact of its efforts will soon be felt nationally as the curriculum for schools throughout the country is revised to include gender and AIDS issues.

In South Africa the National Office is committed to continuing and expanding the work with commercial sex workers piloted in the KwaZulu-Natal Midlands. A briefing paper will be prepared and circulated to the provinces so that they may replicate the project. In addition, gender strategies are now included in the Strategic Plan of the National HIV/AIDS and STD Programme (1996/7-2000/1); a member of the South Africa team has now taken up a key position in the national and AIDSCAP prevention program.

Ongoing efforts in the five countries show that participants in the Gender and AIDS Activity have not stopped at simply implementing their original action plans, but have taken the next step and asked themselves: what about the broader need for ensuring that gender is a cross-cutting issue at the national level? Equipped with the knowledge and methods for introducing gender, and in a position to make decisions, these key policy makers and program managers are no longer satisfied with “gender neutral” AIDS prevention programs. They are making moves toward the integration of gender into all their efforts at successfully containing the AIDS epidemic. Hopefully, the activity described in this report will serve as a model in the continuing battle to slow the growth of HIV/AIDS among women.



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SUMMARY OF THE EVALUATION FINDINGS FROM THE GENDER AND AIDS WORKSHOP

This appendix provides a numerical summary of the main findings from the Evaluation Questionnaire, which was completed by participants at the end of the Gender and AIDS Workshop.

This summary looks at the participants' opinions on the relevance of activities, usefulness of workshop materials and

personal impact of the workshop. It excludes opinions on the participants' more detailed assessment of workshop methods and organization.

The summary is confined to a numerical collation of the participants' assessment, on the five-point scale used in the questionnaire. It therefore does not include any summation of the written comments which were also asked for in the questionnaire.

1. OVERALL ASSESSMENT OF RELEVANCE OF WORKSHOP ACTIVITIES

Participants were asked to rate the relevance of each of the different types of workshop activities on a five-point scale:

0 = Irrelevant 1 = Not entirely relevant 2 = Relevant 3 = Very relevant 4 = Extremely relevant

	ASSESSMENT OF RELEVANCE						
	FREQUENCY						
	0	1	2	3	4	Av	N
Facilitators' Presentations	0	0	3	14	5	3.1	22
Group Work on Personal Experiences	0	1	7	13	6	2.9	27
Group Work on Adolescent and Workplace Case Studies	0	0	5	16	7	3.1	28
Group Work on Case Study Programs	0	0	4	16	8	3.1	28
Country Teamwork to Design an Action Plan	0	0	6	18	3	2.9	27
Simulation of the National AIDS Advisory Council	0	1	4	10	11	3.2	26
Plenary Report Back Meetings	0	1	7	12	6	2.9	26
ALL ACTIVITIES						3.03	

2. OVERALL ASSESSMENT OF USEFULNESS OF WORKSHOP MATERIALS

Participants were asked to rate the usefulness of each different type of workshop material on a five-point scale:

0 = Useless 1 = Not much use 2 = Fairly Useful 3 = Very useful 4 = Extremely useful

	ASSESSMENT OF USEFULNESS						
	FREQUENCY						
	0	1	2	3	4	Av	N
Participant's Guideline	0	1	5	12	11	3.1	29
Analytical Frameworks	0	0	7	9	12	3.2	28
Sequence of Steps Towards Improved Gender Focus	0	0	6	12	11	3.2	29
Case Studies	0	0	4	17	8	3.1	29
Patriarchal Arguments	0	0	4	9	16	3.4	29
Gender Glossary	0	1	6	13	8	3.0	28
ALL MATERIALS						3.17	

3. PERSONAL IMPACT OF THE WORKSHOP

Below are the six questions used to assess the personal impact of the workshop. The numbers show the frequency of responses on a five-point scale of level of agreement with a given statement. Twenty-nine participants responded, but not all answered each question.

As a result of the Workshop:

- a) I am better able to recognize gender issues
0 strongly disagree **0** disagree **1** undecided/unsure **13** agree **15** strongly agree
- b) I have changed my personal attitudes on how to avoid HIV infection
9 strongly disagree **2** disagree **4** undecided/unsure **7** agree **4** strongly agree
- c) I have changed my attitude towards others who are HIV positive, or who have AIDS
7 strongly disagree **3** disagree **3** undecided/unsure **4** agree **7** strongly agree
- d) I have improved my understanding of the process of women's empowerment
0 strongly disagree **1** disagree **1** undecided/unsure **16** agree **11** strongly agree
- e) I have improved my understanding of how to recognize and analyze gender issues which are relevant to HIV/AIDS
0 strongly disagree **0** disagree **0** undecided/unsure **16** agree **13** strongly agree
- f) I have improved my ability to recognize and address gender issues in the planning and implementation of AIDS prevention programs
0 strongly disagree **0** disagree **1** undecided/unsure **13** agree **15** strongly agree

2 The high level of disagreement to the statements at (b) and (c) is indicative of the extent to which workshop participants were already working in AIDS programs, and did not need the workshop as a means to change their attitudes related to AIDS and people living with AIDS.

APPENDIX I

SUMMARY OF FINDINGS FROM THE EVALUATION WORKSHOP

This appendix provides a numerical summary of the main findings from the Evaluation Questionnaire which was given to participants at the end of the Evaluation Workshop.

This summary looks at the participants' opinions on the appropriateness of activities and workshop materials, and

the personal impact of the workshop. It excludes opinions on the participant's more detailed assessment of workshop methods and organization.

The summary is confined to a numerical collation of the participants' assessment, on the five-point scale used in the Questionnaire. It therefore does not include any summation of the written comments which were also asked for in the Questionnaire.

1. OVERALL ASSESSMENT OF RELEVANCE OF WORKSHOP ACTIVITIES

Participants were asked to rate the appropriateness of each of the different types of workshop activities on a five-point scale:

0 = Inappropriate 1 = Not entirely appropriate 2 = Appropriate 3 = Very appropriate 4 = Extremely appropriate

	ASSESSMENT OF APPROPRIATENESS						
	FREQUENCY						
	0	1	2	3	4	Av	N
Reconsideration of Workshop Objectives	0	0	4	11	9	3.2	24
Country Group Work on Action Plan Highlights	0	0	3	9	13	3.6	25
Country Group Work on Action Plan Improvements	0	0	2	11	12	3.4	25
Inter-Country Group Work on Cross-Cutting Topics	0	1	5	8	11	3.2	25
Plenary Report Back Discussions	0	0	6	10	8	3.1	24
Presentations on Evaluation Methods	0	1	5	10	8	3.0	24
Daily Evaluation	0	0	8	8	8	3.0	24
ALL ACTIVITIES						3.21	

2. OVERALL ASSESSMENT OF RELEVANCE OF WORKSHOP MATERIALS

Participants were asked to use the same five point scale that was used in the previous question to assess the usefulness of workshop materials. The numerical summary of the findings is shown in the table below.

0 = Inappropriate 1 = Not entirely appropriate 2 = Appropriate 3 = Very appropriate 4 = Extremely appropriate

	ASSESSMENT OF USEFULNESS						
	FREQUENCY						
	0	1	2	3	4	Av	N
Workshop Plan	0	1	7	10	8	3.0	26
Daily Schedule	0	0	8	10	8	3.0	26
Participant's Guideline	1	0	7	7	11	3.3	26
Action Plan Reports	0	1	4	11	10	3.2	26
End of Day Evaluation Form	0	0	6	13	7	3.0	26
AWI Evaluation Plan	0	0	9	6	9	3.0	24
Evaluation Frameworks	1	0	7	10	7	2.9	
ALL MATERIALS						3.06	

3. PERSONAL IMPACT OF THE WORKSHOP

Below are the six questions used to assess the personal impact of the workshop. The numbers show the frequency of responses on a five-point scale of level of agreement with a given statement.

As a result of the Workshop:

- a) I am better able to design a gender oriented project
1 strongly disagree **0** disagree **0** undecided/unsure **19** agree **6** strongly agree
- b) I am better able to develop alternative strategies to overcome obstacles which stand in the way of gender oriented objectives
0 strongly disagree **0** disagree **1** undecided/unsure **21** agree **4** strongly agree
- c) I have improved my understanding of the process of women's empowerment
0 strongly disagree **0** disagree **3** undecided/unsure **16** agree **7** strongly agree
- d) I am better able to make an evaluation plan for a gender oriented project
1 strongly disagree **0** disagree **3** undecided/unsure **19** agree **4** strongly agree
- e) I am better able to justify gender oriented objectives in AIDS projects
0 strongly disagree **0** disagree **1** undecided/unsure **17** agree **8** strongly agree
- f) I shall be better able to work towards improved gender mainstreaming in national AIDS programs.
1 strongly disagree **0** disagree **2** undecided/unsure **20** agree **3** strongly agree